



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 283_381																								
Application Number 10/664,581		Filed: September 17, 2003																								
For: Apparatus And Method for Verifying Print Quality Of An Encoded Indiciuim																										
Art Unit 2876		Examiner Kimberly D. Nguyen																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 20%; text-align: center;"><u>Fee</u></th> <th style="width: 20%; text-align: center;"><u>Small Entity Fee</u></th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two month (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$450</td> <td style="text-align: center;">\$225</td> <td style="text-align: center;">\$450.00</td> </tr> <tr> <td><input type="checkbox"/> Three month (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1020</td> <td style="text-align: center;">\$510</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four month (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1590</td> <td style="text-align: center;">\$795</td> <td style="text-align: center;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five month (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2160</td> <td style="text-align: center;">\$1080</td> <td style="text-align: center;">\$ _____</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0289</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 100px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p style="margin-left: 100px;"><input type="checkbox"/> attorney or agent of record. Registration Number _____</p> <p style="margin-left: 100px;"><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u>45,283</u></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="text-align: center;">December 5, 2006</p> <hr/> <p style="text-align: center;">Date</p> <p style="text-align: center;">315-425-9000</p> <hr/> <p style="text-align: center;">Telephone Number</p> </div> <div style="width: 45%; text-align: center;"> <hr/> <p style="text-align: center;">Signature</p> <p style="text-align: center;">R. Stephen Rosenholm</p> <hr/> <p style="text-align: center;">Typed or printed name</p> </div> </div> <p style="font-size: small;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____	<input checked="" type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$450	\$225	\$450.00	<input type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____	<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____	<input type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
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12/07/2006 DEMMANU1 00000018 500289 10664581

Sale Ref: 00000038 DAH: 500289 10664581

01 FC:1252 450.00 DA

12/07/2006 DEMMANU1 00000039 500289 10664581

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006**Complete if Known**

Application Number	10/664,581
Filing Date	September 17, 2003
First Named Inventor	Charles E. Biss
Examiner Name	Kimberly D. Nguyen
Art Unit	2876
Attorney Docket No.	283-381

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$450.00

Express Mail Label No. EV969121405US

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Wall Mariama & Bilinski LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments ☒ Credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

PROCESS CLAIM FEE							Small Entity	
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim over 3 (including Reissues)							200	100
Multiple dependent claims							360	180
Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	Multiple Dependent Claims	
	- 20 or HP =		x		=		Fee (\$)	Fee Paid (\$)
HP= highest paid number of total claims paid for, if greater than 20								
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)		
	- 3 or HP =		x		=			
HP =highest number of independent claims paid for, if greater than 3								

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)	Fees Paid (\$)
Other: Two month extension fee	\$450.00

SUBMITTED BY

Signature	<i>R.S. Rosenholm</i>	Registration No. 45,283 (Attorney/Agent)	Telephone 315-425-9000
Name (Print/Type)	R. Stephen Rosenholm	Date	December 5, 2006